



## Ministry of Health

### FREQUENTLY ASKED QUESTIONS BY HEALTH CARE PROVIDERS REGARDING HIV AND TB SERVICE DELIVERY DURING COVID-19 LOCKDOWN

1. **Should Health Care Providers provide ART refills (and TB medicines for the co-infected) to clients visiting their facilities and yet they are not registered there? If YES, how many months' worth of drugs should be provided?**
  - It is MoH/ACP guidance that clients far from their usual ART facilities can visit any nearby facility for their ARV and TB medicines refills during the COVID 19 lockdown. Such clients will be considered “Visitors”.
  - “Visitors” will be provided with one-month drug supply
2. **How will clients served as “visitors” be documented, reported and tracked?**
  - **Documentation;**
    - ✓ Open a counter book for temporary recording of clients as there is inadequate stock of HMIS tools at the health facilities.
    - ✓ Unique ID: Document the client No and Health facility name. For example, If the parent facility is Kangulumira HCIV, ART No 22 the patient unique ID will be 22/ Kangulumira.
    - ✓ Record the client demographic data, history, clinical assessment results (Weight, TB status, Nutrition status, ART refill, CTX refill for those eligible, INH initiation/refill etc.)
    - ✓ For those without their ART exercise books, then the health worker should contact the parent health facility using the directory to find out the patients' details (History) and record them appropriately.
    - ✓ Record all this information in the temporary register and clients' book as a reference point for the parent facility to document / update clients' records in the HIV/ART care card and ART registers (and TB register where applicable) when they go back for ART services after the Covid-19 pandemic.
    - ✓ Dispense drugs for 1month to “visitors”
  - **Reporting;**
    - ✓ Using the health facility directory; the health worker should contact the parent health facility of the client to ensure records reconciliation.
    - ✓ If the client has gone back to the parent facility, then he/she will be reported on by the parent health facility.

- ✓ If the client has not gone back to parent facility for ART services, then he/she will be reported on by this temporary health facility.

- **Tracking;**

- ✓ Attach all clients to a peer educator/ expert client.
- ✓ Follow up clients with a phone call after the duration of dispensation to find out whether they have gone back to the parent health facility.
- ✓ Using the health facility directory; the health worker should contact the parent health facility of the client to update them about their client.

**3. What to do for a visiting client who requests to be formally transferred to the nearby ART facility from where she/he has been accessing ART during the COVID 19 lockdown?**

- Such clients should be supported to get formal transfer forms from their parent ART facilities.

**4. How should clients due for viral load be supported to access viral load testing during the COVID 19 lockdown?**

- Clients due for their viral load and can access their parent ART facilities or are served through CDDPs should be provided with a viral load test as per the national viral load algorithm.
- Clients due for their viral load but far from their parent ART facilities should wait until the lockdown is lifted and travel to their parent ART facilities for viral load testing.

**5. What should be done for clients registered to receive ART from a private for-profit facility that has run out of stock of required ARVs?**

- Private for-Profit facilities should work with IPs and public facilities to ensure all clients receive their medications

**6. How many months' worth of drugs should Health Care Workers provide to clients visiting their usual ART facility (Facilities where they are registered for ART services)?**

- Clients on 1<sup>st</sup> line should be provided with three months drug supply.
- Clients on second or third line should be provided with one-month drug supply due to the current stock challenges
- Clients co-infected with TB or on TB Preventive Therapy (TPT) should have their TB medicines refills aligned with ART refills

**7. Which categories of clients should be given one-month refills?**

- Its recommended that the following categories of clients receive one-month refills;
  - ✓ Visiting clients i.e. clients not registered at the ART facility
  - ✓ Clients on 2<sup>nd</sup> or 3<sup>rd</sup> ART line regimen
  - ✓ Unsuppressed clients
  - ✓ The very sick e.g. clients co-infected with TB and are in intensive phase of TB treatment
  - ✓ Lactating mothers with babies below 6 months of age

**8. How many months' worth of ARVs can an HIV positive pregnant mother be given?**

- Its recommended that the ART refills should be aligned to scheduled ANC visits.

**9. Should Community Drug Distribution Points (CDDPs) be suspended during the COVID 19 period?**

- NO, CDDPs should not be suspended however;
  - ✓ The ART facilities should systematically schedule the clients to ensure no more than 5 clients are at a CDDP at anyone given time.
  - ✓ ART facilities and IPs should ensure strict adherence to infection prevention and control measures

**10. Should Community Client Led ART Delivery (CCLAD) be suspended during the COVID 19 period?**

- NO, CCLADs should not be suspended however;
  - ✓ CCLAD members should be sensitized about COVID 19 Infection Prevention and Control measures

**11. How will the health facilities ensure adequate stock of ARVs to support multi-month dispensing?**

- Guidance has been provided to National Warehouses (including NMS) to serve facilities as per their orders.
- National Medical Stores (NMS) has planned their deliveries as follows;
  - ✓ Lower Level Health Facilities (Accredited HCIV's and HCIII's): These facilities shall have Cycle 5 and Cycle 6 orders processed in one go
  - ✓ General Hospitals; Regional and National Referral Hospitals: NMS is processing Cycle 5 & 6 orders processed separately, according to the delivery schedule.